

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	T.H.	5C844	02/07/07
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected N .....  
 = ..... Allowed I .....  
 - (Through numeral)... Canceled A .....  
 ÷ ..... Restricted O .....  
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If more than 150 claims or 10 actions  
 staple additional sheet here

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